

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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FILED  
Feb 17 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P27507 (3)**  
1. Corporation Name  
**SUBARU LEASING CORP.**



Principal Place of Business <b>2235 ROUTE 70 WEST CHERRY HILL NJ 08002</b>	Mailing Address <b>2235 ROUTE 70 WEST CHERRY HILL NJ 08002-3380</b>
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified <b>12/29/1989</b>	3a. Date of Last Report <b>03/05/1996</b>
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number <b>22-272117</b>	Applied For <input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23. Zip Country	28. Zip Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24. Zip	25. Country	29. Zip	30. Country
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent <b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324</b>		10. Name and Address of New Registered Agent	
81. Name		82. Street Address (P.O. Box Number is Not Acceptable)	
83.		84. City	
		85. Zip Code <b>FL</b>	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PD</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DOLL, THOMAS J</b>	1.2 NAME	
STREET ADDRESS	<b>2235 RT 70 WEST</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>CHERRY HILL NJ</b>	1.4 CITY - ST - ZIP	
TITLE	<b>V</b> <input type="checkbox"/> DELETE	2.1 TITLE	<b>V/D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>NISHIZAWA, TETSURO</b>	2.2 NAME	<b>Nishizawa, Tetsuro</b>
STREET ADDRESS	<b>2235 RT 70 WEST</b>	2.3 STREET ADDRESS	<b>2235 Route 70 West</b>
CITY - ST - ZIP	<b>CHERRY HILL NJ</b>	2.4 CITY - ST - ZIP	<b>Cherry Hill, NJ 08002</b>
TITLE	<b>SD</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SCHARFF, JOSEPH T.</b>	3.2 NAME	
STREET ADDRESS	<b>2235 ROUTE 70 WEST</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>CHERRY HILL NJ</b>	3.4 CITY - ST - ZIP	
TITLE	<b>T</b> <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SCHARFF, JOSEPH T.</b>	4.2 NAME	
STREET ADDRESS	<b>2235 ROUTE 70 WEST</b>	4.3 STREET ADDRESS	
CITY - ST - ZIP	<b>CHERRY HILL NJ</b>	4.4 CITY - ST - ZIP	
TITLE	<b>V</b> <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>L'ESPERANCE, KENNETH C.</b>	5.2 NAME	
STREET ADDRESS	<b>2235 ROUTE 70 W</b>	5.3 STREET ADDRESS	
CITY - ST - ZIP	<b>CHERRY HILL NJ</b>	5.4 CITY - ST - ZIP	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FLICK, LAWRENCE F.</b>	6.2 NAME	<b>Flick, II, Lawrence F.</b>
STREET ADDRESS	<b>FOUR PENN CENTER</b>	6.3 STREET ADDRESS	<b>2235 Route 70 West</b>
CITY - ST - ZIP	<b>PHILADELPHIA PA</b>	6.4 CITY - ST - ZIP	<b>Cherry Hill, NJ 08002</b>

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  DATE: 2-5-97 DAYTIME PHONE #: 609-488-8500

CR2E034 (9/96)

Subaru Leasing Corp.

Additional Director:

Bruce C. Rosenthal

15 South Franklin St.  
Wilkes-Barre, PA 18711